Date and Ti	ime received	l by	Board	of
	Registrars			

PETITION FOR CALLING A SPECIAL TOWN MEETING FOR THE PURPOSES STATED BELOW

C4 11 1	1		
Contact name, address and pl	none number:		

INSTRUCTIONS TO SIGNERS

For your signatures to be valid you must be a registered voter in the town named above and your signature should be written as substantially registered. If you are prevented by physical disability from writing, you may authorize some person to write your name and residence in your presence.

SIGNER'S STATEMENT

We, the undersigned, are qualified voters of the Town of Westford, and in accordance with the provisions of the law request a special town meeting for the purpose stated above.

	Office				
	Use	Signature	Printed Name	Street Address	Precinct
	Only				
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Attention Voters: Before signing read signer information on the other side. Attention Registrars: Before certifying signatures, see instructions to registrar below

(Office				
	Use	Signature	Printed Name	Street Address	Precinct
	Only				
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					
			•		

WARNING – Criminal penalty for unlawfully signing, altering, defacing, mutilating or destroying this petition: fine of up to \$1,000 or imprisonment for one year.

INSTRUCTIONS TO REGISTRARS

- You must time stamp or write date and time these papers are received
- Draw a line through any blank spaces not containing a signature
- Each check must be certified by three registrars
- For names not certified use the code on the right

- $N-No \ such \ registered \ voter \ at this \ address$
- $S-\mbox{Unable}$ to identify signature or address as that of a voter because of form of signature or address
- $T-Already \ signed \ the \ petition$

WESTFORD WESTFORD		At least three registrars must be signed or stamped below.
City or Town	Month and Day	
We certify that Number of	of names	
Above signatures checked thus √ are the voters from the town of WESTFORD	he names of qualified	Registrar of Voters of WESTFORD